

July 31, 1998

Refer to:
MB:CF
IA WA 0242.90.08

Charles M. Palmer, Director
Department of Human Services
Hoover State Office Building, 5th Floor
Des Moines, Iowa 50319

Dear Mr. Palmer:

I am pleased to inform you that your request to amend Iowa's existing Medicaid home and community-based services (HCBS) waiver which serves persons with mental retardation who would otherwise require care in an institution is approved. The waiver amendment has been assigned control number 0242.90.08, which should be used in any subsequent correspondence.

Specifically, the amendment allows for an increase in the number of individuals served by the MR/DD waiver and removes the requirement that an individual must have previously resided in a nursing facility or an intermediate care facility for persons with mental retardation in order to receive supported employment services.

Based on the assurances provided in your original request and additional information supplied, we have concluded that the request conforms to the requirements of the statute and regulations. Therefore, I approve the request for amendment of the waiver cited above effective August 1, 1998.

The following estimates of utilization and cost of waiver services are approved.

	<u>C</u>	<u>x</u>	<u>D</u>	<u>Total</u>
Year 5 (07/01/98-06/30/99)	5,352		\$18,813	\$100, 688,666

If you should have any questions about this matter, please contact Carol Finkle at (816) 426-3406.

Sincerely,

Joe Tilghman
Regional Administrator

cc: Don Herman
Carol Finkle

bcc:
HCBS Waiver Team
Mary Jean Duckett
Luce

FINKLE:pl December 6, 2002 wvr242ap.ltr

Home and Community-Based Services
WAIVER RENEWAL/MODIFICATION

WAIVER REQUEST - EXECUTIVE SUMMARY

STATE: Iowa

WAIVER NO. 0242.90.08

1. TYPE OF REQUEST

Initial ___ Renewal ___ Amendment X Modification ___ Extension ___

2. TARGET POPULATION

Aged___ MRDD X AIDS ___ OTHER ___

3. WAIVER SERVICES

___ Medical Case Management

___ Personal Care

___ Day Treatment

X Respite Care

___ Homemaker/Chore

___ Habilitation

X Other(specify)

Home Health Aide, Home and Vehicle Modification, Personal Emergency System Services, Nursing Services, Supported Community Living and Supported Employment and Consumer Directed Attendant Care

4. EFFECTIVE DATES

Initial Waiver 03/10/92

These Requests 08/01/98

5. CHANGES REQUESTED

- 1) Increase the number of waiver slots. 2) Remove the requirement that an individual must have previously resided in a nursing facility or an intermediate care facility for persons with mental retardation in order to receive supported employment services as permitted by the Balanced Budget Act (BBA).

RECOMMENDATION - APPROVAL X DISAPPROVAL ___

Rationale: This amendment increases access to the waiver by increasing the number of waiver slots available in 44 counties and for children. Six counties have chosen to decrease waiver slots available in their county. The amendment adds a total of 679 new waiver slots while decreasing existing slots by 52, for a net gain of 627 waiver slots.

The request to remove the facility residency requirement for supported employment will open this service to all waiver eligibles not just those who have resided in a facility.

The Medicaid Division waiver review team has reviewed the above waiver and has found that the waiver meets the requirements of the Act and Regulations.

<u>Waiver Team Member</u>	<u>Signature</u>	<u>Date</u>
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Carol Finkle, Team Leader	_____	
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Mark Byler, Formula	_____	
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Sharon Taggart, Services		
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